

ORIGINAL

Docket No. S-20864A-12-0439



STATE OF ARIZONA)

AMENDED AFFIDAVIT

County of Maricopa)

I, Aikaterine Vervilos, for the Securities Division of the Arizona Corporation Commission, hereby certify that on the 29th day of October, 2012, I served a copy of Notice of Opportunity for Hearing regarding proposed Order to Cease and Desist, Order of Restitution, Order of Revocation, Order for Administrative Penalties, and Order for other Affirmative Action, Docket No. S-20864A-12-0439, upon Legacy Financial Advisors, L.L.C. at 4549 N. Camino Campero, Tucson, Arizona, 85750, by: certified mail, return receipt requested. Attached as Exhibit A is a copy of the return receipt. The original return receipt is in the case file.

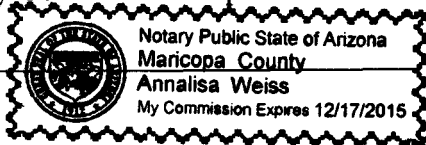
AFFIANT

11-5-12
DATE

SUBSCRIBED AND SWORN TO BEFORE me this 5th day of
November, 2012.

NOTARY PUBLIC

My Commission Expires:



Arizona Corporation Commission
DOCKETED

NOV 05 2012

2012 NOV -5 A 9:18

RECEIVED

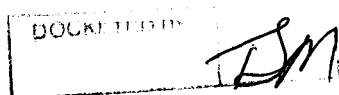


Exhibit A


SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Legacy Financial Advisors, LLC
Mark Hughes
4549 N. Camino Campero
Tucson, AZ 85750

COMPLETE THIS SECTION ON DELIVERY

A. Signature 		<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
B. Received by (Printed Name) Mark Hughes	C. Date of Delivery 11/29	
D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No		

3. Service Type	
<input checked="" type="checkbox"/> Certified Mail	<input type="checkbox"/> Express Mail
<input type="checkbox"/> Registered	<input type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Insured Mail	<input type="checkbox"/> C.O.D.
4. Restricted Delivery? (Extra Fee)	<input type="checkbox"/> Yes

2. Article Number (Transfer from service label)	7010 1670 0000 9052 2570	102595-02-M-1540
PS Form 3811, February 2004	Domestic Return Receipt	